

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

TONY B. GASKINS, ET AL.,
PLAINTIFFS,

CIVIL ACTION
No. 05-11230-JLT

v.

KATHLEEN M. DENNEHY, ET AL.,
DEFENDANTS;

PLAINTIFFS JOINT MOTION
FOR RECONSIDERATION AND TO
CLARIFY JUDGE'S ORDER

NOW COMES THE PLAINTIFFS IN THE
ABOVE CIVIL ACTION SEeks TO CLARIFY
JUDGE TAURO'S ORDER OF 8/3/05 AND
IN SUPPORT OF THIS MOTION, STATES THE
FOLLOWING.

1. ALL DEFENDANTS WERE SERVED A
COPY OF THE SUMMONS AND COMPLAINT
BY THE U.S. MARSHAL ON DIFFERENT
DATES. DAVID NOLAN WAS SERVED ON
7/26/05; JOHN LOONAN WAS SERVED ON

-2-

7/26/05; LISA MITCHELL WAS SERVED ON 7/26/05; TIMOTHY HALL WAS SERVED ON 7/26/05; BEVERLY VEGAR WAS SERVED ON 7/26/05, AND KATHLEEN DENNEY WAS SERVED ON 8/8/05.

AND ALL DEFENDANTS RECEIVED A COPY OF PLAINTIFFS MOTION FOR TRO AND PRELIMINARY INJUNCTION.

2. DAVID J. RENTSCH, COUNSEL FOR DEFENDANTS, FILED HIS NOTICE OF APPEARANCE ON AUGUST 15, 2005, THE SAME DAY OF ENTRY OF THIS COURT'S 8/8/05 ORDER.

3. ALL PARTIES WERE SERVED AND PROPERLY NOTIFIED AND PLAINTIFFS CONTEND THAT IT WOULD BE UNNECESSARY TO HAVE TO RE-SERVE THE DEFENDANTS WITH ANOTHER TRO AND PRELIMINARY INJUNCTION, WHEN ITS OBVIOUS THERE WAS MISCOMMUNICATION BETWEEN THE MARSHAL MAKING

-3-

SERVICE ON THE DEFENDANTS AND
THIS COURT.

4. THE DEFENDANTS COUNSEL SOLENT
ON EXTENDING OF TIME TO RESPOND
TO PLAINTIFFS COMPLAINT AND TRO
AND PRELIMINARY INTUNCTION ON
SEPTEMBER 15, 2005, AND THIS COURT
SHOULD RECONSIDER ITS AUGUST 3,
2005 ORDER AND ORDER THAT SINCE
ALL DEFENDANTS WERE SERVED AND
PROPERLY NOTIFIED, THAT THEY SHOULD
BE REQUIRED, THROUGH COUNSEL, TO
RESPOND TO PLAINTIFFS COMPLAINT
AND MOTION FOR TRO AND PRELIMIN-
ARY INTUNCTION ON SEPTEMBER
15, 2005, AS REQUESTED BY COUNSEL.

RESPECTFULLY SUBMITTED,


TONY GASKINS, PAUSE

MCI- CEDAR JUNCTION

P.O. BOX 100

SOUTH WALPOLE, MA. 02071

DATED: 8/21/05

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

TONY B. GASKINS, ET AL.,

PLAINTIFFS,

CIVIL ACTION

v.

NO. 05-11230 JLT


KATHLEEN DENNEHY, ET AL.,

DEFENDANTS.

CERTIFICATE OF SERVICE

I, TONY B. GASKINS, CERTIFY
THAT I CAUSED A TRUE COPY OF
PLAINTIFFS' "MOTION FOR RECONSIDERA-
TION AND MOTION TO CARRY JUDGE'S
ORDER" TO BE SERVED ON: DAVID J.
RENTUCH, COUNSEL, DEPARTMENT OF
CORRECTION, LEGAL DIVISION, 70 FRANKLIN
STREET, SUITE 600, BOSTON, MA. 02110-
1300, BY FIRST CLASS MAIL, POSTAGE
PREPAID.

DATED: 8/21/05



TONY B. GASKINS, PRUE
NCCI- CEDAR JUNCTION
P.O. BOX 100
SOUTH WILPOLE, MA. 02071

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS

SERVE  **AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Tony B. GASKINS
PO Box 100
So. Walpole MA 02091

Number of process to be served with this Form - 285	
Number of parties to be served in this case	
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☐ PLAINTIFF ☐ DEFENDANT

TELEPHONE NUMBER

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>33</u>	District to Serve No. <u>28</u>	Signature of Authorized USMS Deputy or Clerk <u>[Signature]</u>	Date <u>7/19/05</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <u>CHERYL WINTER PARKER</u>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service <u>7/19/05</u>
	Time <u>11:15</u> am
	Signature of U.S. Marshal or Deputy <u>[Signature]</u>

Service Fee <u>45.00</u>	Total Mileage Charges (including endeavors) <u>13.27</u>	Forwarding Fee <u>—</u>	Total Charges <u>58.27</u>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

NOTE


PRIOR EDITIONS
MAY BE USED

3. NOTICE OF SERVICE

FORM USM-285 (Rev. 12/15/80)

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS

SERVE  **AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

<p>Number of process to be served with this Form - 285</p> <p>Number of parties to be served in this case</p> <p>Check for service on U.S.A.</p>	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 38	No. 38	<i>[Signature]</i>	8/31/05

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input checked="" type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. <input type="checkbox"/>							
Address (complete only if different than shown above)								
<table border="1"> <tr> <td>Date of Service</td> <td>Time</td> </tr> <tr> <td>8/31/05</td> <td>1000 am</td> </tr> <tr> <td colspan="2">Signature of U.S. Marshal or Deputy</td> </tr> <tr> <td colspan="2"><i>[Signature]</i></td> </tr> </table>		Date of Service	Time	8/31/05	1000 am	Signature of U.S. Marshal or Deputy		<i>[Signature]</i>
Date of Service	Time							
8/31/05	1000 am							
Signature of U.S. Marshal or Deputy								
<i>[Signature]</i>								

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS: *[Handwritten notes]*

NOTE

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

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Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☐ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 22	District to Serve No. 23	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 7/1/05
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

GRACE M. HICKER - PERSONAL

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

7/1/05

Time

11:15

am

pm

Signature of U.S. Marshal or Deputy

Service Fee 45.00	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges 45.00	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:


NOTE

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS

SERVE  **AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)


SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	
	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold Fold


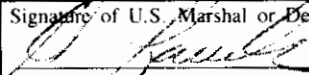
Signature of Attorney or other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 38	No. 20		7/19/05

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service
	7/20/05
	Time 11:15 am
	Signature of U.S. Marshal or Deputy
	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
45.00			45.00			

REMARKS:

NOTE

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
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PLAINTIFF	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: 	Number of process to be served with this Form - 285	
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Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 2	District to Serve No. 2	Signature of Authorized USMS Deputy or Clerk	Date 7/16/05
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) BROWN THOMAS W. JR.	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. Date of Service 7/16/05 Time 11:00 am pm
Address (complete only if different than shown above)	
Signature of U.S. Marshal or Deputy	


Service Fee 45.00	Total Mileage Charges (including endeavors) 18.25	Forwarding Fee	Total Charges 63.25	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

NOTE

U.S. Department of Justice
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DEFENDANT	TYPE OF PROCESS

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Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <i>CHARLYN M. BAKER</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.					
Address (complete only if different than shown above)	Date of Service 7/19/05	Time 11:15 am				
	Signature of U.S. Marshal or Deputy <i>[Signature]</i>					
Service Fee \$5.00	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges \$5.00	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS:

NOTE